

## PART B - FEE(S) TRANSMITTAL

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**Commissioner for Patents**  
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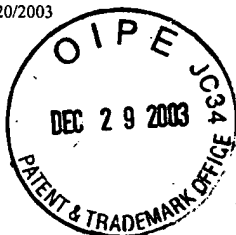
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25944

7590

10/20/2003

**OLIFF & BERRIDGE, PLC**  
**P.O. BOX 19928**  
**ALEXANDRIA, VA 22320**



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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/694,021	10/23/2000	TOSHIFUMI TAKAOKA	106967	8973

TITLE OF INVENTION: CONTROL APPARATUS FOR TRANSMISSION- EQUIPPED HYBRID VEHICLE, AND CONTROL METHOD FOR THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$50	\$0	\$50	01/20/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
WAKS, JOSEPH	2834	290-04000A			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 OLIFF & BERRIDGE PLC

2 \_\_\_\_\_

3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

TOYOTA JIDOSHA KABUSHIKI KAISHA

TOYOTA, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies \_\_\_\_\_

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☒ A check in the amount of the fee(s) is enclosed. check no. 149618 (\$50.00)☐ Payment by credit card. Form PTO-2038 is attached.

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(Authorized Signature)

(Date)

Phillip D. Mancini, Reg. No. 46,743 12-29-03

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Adjustment date: 01/07/2004 EFLORES1  
 11/18/2002 KZENDIE1 00000089 09694021  
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01/07/2004 EFLORES1 00000060 09694021  
 01 FC:1501 1330.00 OP

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